insurance of medicines

3835. SHRI DILIP SING JUDEV: Will the Minister of HEALTH AND FAMILY WELFARE to© pleased to state:

(a) whether the DG.H.S. issued orders some time back that the C.G.H.S. beneficiaries sufferingi from chronic ailments and having prescriptions from the Senior Physicians in the RML, Safdarjang and AIIMS Hospitals in the capital for 2 months, should be issued medicines for one month at a time;

(b) if so, whether these orders are still in force;

(c) whether Government are aware that in some of the C.G.H.S. dispensaries in South Delhi, the orders are not being followed by the doctors and they are subjecting the patients to great hardship;

(d) whether Government would recirculate these orders to all' the C.G.H.S. dispensaries in the Capital; and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D. K. THARA DEVI SIDDHARTHA): (a) There are existing instructions for issue of medicines for a period of one month at a time to CGHS beneficiaries suffering from chronic ailments where the prescription is given by the Senior Physician of Dr. Ram Mano-har Lohia Hospital/Safdarjung Hospital.

(b) Yes, Sir.

(c) No specific Complaint has been received in this regard by the Government.

(d) and (e) It will be re-circulated to all CGHs dispensaries to dis-ptay on the Notice Board.

Aged CGHS beneficiaries

3836. SHRI DILIP SING JUDEV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have issued orders that CGHS beneficiaries aged 70 years and above need not have to stand in queue firstly at the registration counter, secondly at the doctors, clinic and thirdly at the pharmacist's issue counter;

(b) if so, whether these orders are still in force;

(c) if so, whether Government would ensure that the orders are prominently displayed in each CGHS dispensary and Central Government hospital in the capital to ensure that these old , so called 'senior citizens' are not made to stand in tortuous queues, treated sympathetically by the doctors and other paramedical staff; and

(d) if not, what are the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D. K. THARA DEVI SIDDHARTHA): (a) Instructions have already been issued for providing special benefits to the pensioners of the age of 60 years and above i.e. they may be examined out of turn and medicines may be issued for one month for chronic ailments.

(b) Yes, Sir.

(c) Instructions have already been issued to display the orders on Notice Board of each dispensary and Central' Government hospitals for convenience of the pensioners.

(d) Question does not arise.

Issuance of Medicines to C.G.H.S. beneficiary

3837. SHRI DIPIL SINGH JADEV. Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) wnether C.G.H.S. had issued any instructions that a C.G.H.S. beneficiary, in whose case, medicines as prescribed by a Specialist, are indented, shall have to get Ms prescription registered once again when he calls on the Dispensary concerned to collect the medicines;

(b) whetther this procedure causes mental agony and waste of time particularly to the aged beneficiaries standing in queues at two places;

(c) what is the rationale behind this exercise when the issue of medicines is recorded by the Store-Keeper on the prescription itself and the C.G.H.S. beneiiriary has to sign the Issue Register putting the date and his address?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D. K. THARA DEVI SIDDHARTHA): (a) No, Sir.

(b) Question does not arise.

(c) Instructions are already there that no registration of prescription is required tor collection of Indented Medicines in the dispensary. Instructions will be reissued to all dspensaries.

Clearance of Medical Claims

3838. SHRI G. Y. KRISHNAN: Will the Minister of HEALTH AND FAMILY WELFIARE be pleased to refer to the answer to Unstarred Question 2048 given in the Rajya Sabha on the llth March. 1992 and state:

(a) the progress made in the clearance of these claims as on 20th July, 1992;

(b) the number of claims which are pending for the last more than 6 months; and

(c) by when the backlog is likely to be cleared and what mechanism has been devised so that such a huge backlog is not allowed to accumulate for such long periods?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D. K. THARA-DEVI SIDDHARTHA): (a) Out of the total pending medical claims of 2126, 2021 medical claims have already been settled.

(b) There are 105 medical claims pending for the last six months.

(c) As soon as the beneficiaries complete the prescribed formalities, the claims will be settled.

The settlement of medical reimbursement claims have been decentralised with effect from 1-4-1992 and the Ministries/Departments have been empowered to settle the medical claims where treatment has been taken from Government/ referral recognised hospitals.

Spread of AIDS In North Eastern States

3839. SHRI BHADRESHWAR BURAGOHAIN; Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the cause of the outbreak of AIDS in the North-East;

(b) what kind of preventive measures have been taken by Government and the measures taken to educate the general public; and

(c) whether there is any cell in the Medical[1] Colleges of these States to detect AIDS virus and if not, by when such a cell is likely to be set up?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D. K. THARA DEVI SIDDHARTHA): (a) The major cause of spread of HTV infection in North-Eastern states especially Manipur, Mizoram and Nagalan has! been found to be intravenous drug abuse among the young population, of these states. The infection is passed on from one individual to another by sharing of common needles. according to a study by Indian Council of Medical Research nearly 94 per cent of intravenous drug users snare the needles and majority of them use unclean needles. In addition, there have been other causes like heterosexual promiscuity and transfusion of infected blood in a few cases.

(b) Following preventive measures have been taken and are proposed to be taken to check the spread of HTV infection:—

— To create awareness among youths, IDUs, General Public, NGOs and